

# Indoor Winter Recreation Soccer League



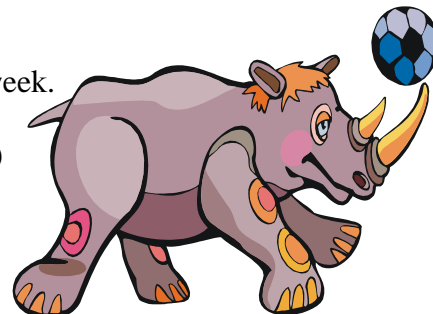
**For:** Children in kindergarten, 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> grades.

**Dates:** Saturdays, November 20, 27, December 4, 11, and 18, 2004.

**Time:** 12:00pm to 5:00pm. Each team plays one 50 minute game each week.

**Location:** All games will be played at Soccer Centers (300 Memorial Drive) in Somerset, NJ just a half mile off exit 12 of Route 287.

**Cost:** \$75.00/player or \$720/team.  
Checks made payable to "Soccer Centers".



Players may sign up individually or as a team. If signing up as a team please fill out a registration form for each player and staple all forms together. All players will be grouped according to age. Players will receive t-shirts.

Space is limited; registration is based on first come first serve at the Bridgewater Recreation Department.

**Three ways to register!** In person at the Bridgewater Recreation Department (Municipal Building – 700 Garretson Road) 9am to 5pm Monday to Friday, drop registration off in the "REC" mailbox located around back of Municipal Building before or after office hours, or via postal service.

**Bridgewater Recreation Department** P.O. Box 6300/700 Garretson Road – Bridgewater, NJ 08807 (908) 725-6373 office hours 9am to 5pm Monday to Friday [www.bridgewaternj.gov](http://www.bridgewaternj.gov)

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## 2004 Winter Indoor Recreation Soccer League

- ☐ Individual - \$75.00 – checks payable to "Soccer Centers"  
☐ Team - \$720.00 – checks payable to "Soccer Centers"

Last Name: _____		First Name: _____	Circle Gender: Male or Female
Mailing Address: _____		Town: _____	Zip: _____
Home Phone #: (     ) _____		Parent Work #: (     ) _____	
Parent Cell #: (     ) _____		Parent E-mail Address: _____	
Date of Birth: ____/____/____	Age as of 11/20/04: ____	Circle Grade as of September 2004:	K     1     2     3

Please note that Bridgewater Township Recreation Department does not provide individual medical coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

